

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

New Jersey Republican State Committee

ADDRESS (number and street) ▼

150 W State St

☐ Check if different than previously reported. (ACC)

Trenton

NJ

08608-1105

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00164418

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report (Q1)
- ☐ July 15  
Quarterly Report (Q2)
- ☐ October 15  
Quarterly Report (Q3)
- ☐ January 31  
Year-End Report (YE)
- ☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)  
(Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)  
(Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☒ Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
12 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
12 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James Foerst

Signature of Treasurer

James Foerst

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
01 29 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

New Jersey Republican State Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
12		01		2015

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2015</td></tr></table>	Y	Y	Y	Y	Y	2015						<table><tr><td colspan="5"></td><td>241024.74</td></tr></table>						241024.74
Y	Y	Y	Y	Y														
2015																		
					241024.74													
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5"></td><td>31430.98</td></tr></table>						31430.98											
					31430.98													
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5"></td><td>55527.83</td></tr></table>						55527.83	<table><tr><td colspan="5"></td><td>309564.30</td></tr></table>						309564.30				
					55527.83													
					309564.30													
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5"></td><td>86958.81</td></tr></table>						86958.81	<table><tr><td colspan="5"></td><td>550589.04</td></tr></table>						550589.04				
					86958.81													
					550589.04													
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5"></td><td>24128.80</td></tr></table>						24128.80	<table><tr><td colspan="5"></td><td>487759.03</td></tr></table>						487759.03				
					24128.80													
					487759.03													
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5"></td><td>62830.01</td></tr></table>						62830.01	<table><tr><td colspan="5"></td><td>62830.01</td></tr></table>						62830.01				
					62830.01													
					62830.01													
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5"></td><td>0.00</td></tr></table>						0.00											
					0.00													
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5"></td><td>48788.08</td></tr></table>						48788.08											
					48788.08													



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

New Jersey Republican State Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 12 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 12 / 31 / 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

43890.00

229140.00

(ii) Unitemized .....

3425.00

5901.43

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

47315.00

235041.43

(b) Political Party Committees .....

0.00

30000.00

(c) Other Political Committees

(such as PACs).....

7000.00

42000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

54315.00

307041.43

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

1206.46

1225.19

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

6.37

1297.68

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

55527.83

309564.30

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

55527.83

309564.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	6824.51
(ii) Non-Federal Share.....	0.00	39451.94
(b) Other Federal Operating Expenditures .....	22628.80	292578.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	22628.80	338854.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1500.00	1500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	4000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1500.00	5500.00
29. Other Disbursements .....	0.00	1500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	141904.55
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	141904.55
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24128.80	487759.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24128.80	448307.09

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	54315.00	307041.43
34. Total Contribution Refunds (from Line 28(d)) .....	1500.00	5500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	52815.00	301541.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	22628.80	299402.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1206.46	1225.19
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	21422.34	298177.35

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

**A. Julie McLaughlin**

Mailing Address 4547 Province Line Rd

City

Princeton

State

NJ

Zip Code

08540-2211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / 04 / 2015

**Transaction ID : A33675E0DE47A4932B12**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Henry Odunlami**

Mailing Address 537 Mt. Kemble Avenue

City

Morristown

State

NJ

Zip Code

07960-6750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Genpsey PC

Occupation

Physician

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

12 / 09 / 2015

**Transaction ID : A98855D4EB9DF40FCB40**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

**c. Chetan Shah**

Mailing Address 9 Grace Hill Ct

City

Titusville

State

NJ

Zip Code

08560-1447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Princeton Eye and Ear

Occupation

ENT Doctor

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

890.00

Date of Receipt

12 / 10 / 2015

**Transaction ID : A04801E03CF264BC99A3**

Amount of Each Receipt this Period

890.00

In-kind:Food/Beverage

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7390.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 7 OF 24

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New Jersey Republican State Committee

Full Name (Last, First, Middle Initial)

**A. Chirag Shah**

Mailing Address 32 Belamour Dr

City	State	Zip Code
Washington Crossing	PA	18977-1368

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Self

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : A18B3B6E07C9C4F62887

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Renee Kucowski**

Mailing Address 52 Fiddlers Creek Rd

City	State	Zip Code
Titusville	NJ	08560-1801

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Simone Realty

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : AC8A260C0F1CA4C39B5F

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Jagruti Panwala**

Mailing Address 11 Sienna Circle

City	State	Zip Code
Warminster	PA	18974-1788

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Keystone Financial Mgmt

Financial Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	14	/	2015

Transaction ID : AF3FE21E800264B38860

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 24  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Jersey Republican State Committee

Full Name (Last, First, Middle Initial)

### A. NJ Dealers Auto Mall Inc

Mailing Address 330 Commerce St

City State Zip Code  
Bridgeton NJ 08302-2615

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 16 2015

Transaction ID : A289F3135E73043839AD

Amount of Each Receipt this Period

1500.00

Refunded 12/17/15

Full Name (Last, First, Middle Initial)

### B. Tavit Najarian

Mailing Address 17 Shrewsbury Dr

City State Zip Code  
Rumson NJ 07760-2007

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Najarian Associates

Occupation

senior executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 16 2015

Transaction ID : A15CB5A690FB1474EAC3

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

### C. David Baker

Mailing Address 1 Globe Court

City State Zip Code  
Red Bank NJ 07701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Precision Pick

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 16 2015

Transaction ID : A3E06A63B768D4D74A71

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 24  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

**A. Dean Durling**

Mailing Address PO Box 600

City	State	Zip Code
Whitehouse Station	NJ	08889-0600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Quick Chek Corp

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	22	/	2015

**Transaction ID : A961B0C8796494EF59B1**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Edward Walsh**

Mailing Address 9 Conkling St

City	State	Zip Code
Basking Ridge	NJ	07920-1717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Avison Young

Occupation

Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	22	/	2015

**Transaction ID : A20BDDF8F8E0A48339F1**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Richard Freeman**

Mailing Address 2232 Corson Ln

City	State	Zip Code
New Hope	PA	18938-5826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Robert Wood Johnson

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	22	/	2015

**Transaction ID : AC25AE0C0D0B84961989**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

3500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 24

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

## **A. Martin Tuchman**

Mailing Address 4422 Route 27  
PO Box 582

City State Zip Code  
Kingston NJ 08528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2015

**Transaction ID : AF083F444F69F4D1ABFC**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Lisa Freeman**

Mailing Address 2232 Corson Ln

City State Zip Code  
New Hope PA 18938-5826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Physician Practice Mgr Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2015

**Transaction ID : ADFBE646A5CDF4E7CB63**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Inez Inserra**

Mailing Address 20 Henion Garden

City State Zip Code  
Mahwah NJ 07430-2594

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LA Sunset Tanning Salon

Occupation

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 22 2015

**Transaction ID : A00FD3686956142ED9A2**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

**A. Elaine Grillo**

Mailing Address 110 Street Rd

City State Zip Code  
 New Hope PA 18938-9200

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 22 2015

**Transaction ID : A7EA7A94925F94920AAB**

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. Theresa Dinallo**

Mailing Address 459 Burton Avenue

City State Zip Code  
 Hasbrouck Heights NJ 07604

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 12 28 2015

**Transaction ID : A59C01AEA83B847CBB43**

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

20000.00

43890.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 24  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

## **A. Republican National Committee**

Mailing Address 310 1st St SE

City  
Washington

State Zip Code  
DC 20003-1885

FEC ID number of contributing  
federal political committee.

**C** C00164418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2015

**Transaction ID : A0985BDD591F94999AB9**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. Allergan Pac**

Mailing Address 400 Interpace Pkwy  
Bldg A

City  
Parsippany

State Zip Code  
NJ 07054-1120

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 22 / 2015

**Transaction ID : A1B39866071A44A4DA43**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7000.00

7000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 24

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address PO Box 1270

City State Zip Code  
Newark NJ 07101-1270

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2015

**Transaction ID : A68F9822E75694B27A7F**

Amount of Each Receipt this Period

1150.71

Refund of Previous Years Overpayment

Full Name (Last, First, Middle Initial)

## **B. United Parcel Service**

Mailing Address PO Box 7247-0244

City State Zip Code  
Philadelphia PA 19170-0001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

55.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2015

**Transaction ID : AD9BB1B7294CF45DFA0B**

Amount of Each Receipt this Period

55.75

Refund of Overpayment

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1206.46

1206.46

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 14 OF 24  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	--

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address East State Street

City	State	Zip Code
Trenton	NJ	08608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			30			2015			

**Transaction ID : A80081F1193F246CEBCE**

Amount of Each Receipt this Period

6.37

Interest

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6.37

6.37

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New Jersey Republican State Committee

### A. Chetan Shah

Mailing Address 9 Grace Hill Ct

City	State	Zip Code
Titusville	NJ	08560-1447

Purpose of Disbursement
In-kind:Food/Beverage

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2016

☒ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : B04801E03CF264BC99A3

Amount of Each Disbursement this Period

890.00

Full Name (Last, First, Middle Initial)

### B. Bank of America

Mailing Address East State Street

City	State	Zip Code
Trenton	NJ	08608

#### Purpose of Disbursement Bank Fee

Candidate Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

**Transaction ID : BD830EB9BB9F64E95806**

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	0.15
25-34	0.25
35-44	0.20
45-54	0.15
55-64	0.10
65-74	0.05
75-84	0.05
85+	0.05

Full Name (Last, First, Middle Initial)

### C. Bank of America

Mailing Address East State Street

City	State	Zip Code
Trenton	NJ	08608

[illegible]

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : BDAF7A6AF9FED4725BCI

Amount of Each Disbursement this Period

0.03

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

890.73

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New Jersey Republican State Committee

### A. Bank of America

Three 7-segment displays are shown, each with a different color (blue, green, red) and a different font (serif, sans-serif, and a mix). The first display shows '12', the second shows '01', and the third shows '2015'. The displays are arranged horizontally and separated by slashes.

00:

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

A horizontal number line with arrows at both ends. It has tick marks every 0.5 units. The number 5.50 is labeled above the tick mark that is 11 units to the right of the origin.

### B. Bank of America

00

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Country	Vaccination Rate (%)
United States	53.95
Israel	50.86
South Korea	47.8

### C. ADP

00-

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

89.25

148.70

[illegible]



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Jersey Republican State Committee

Full Name (Last, First, Middle Initial)

**A. Cooperative Communications**

Mailing Address PO Box 903

City	State	Zip Code
Belleville	NJ	07109-0903

Purpose of Disbursement  
Telecommunications

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2015

Transaction ID : BC2B494E529A1498A9DA

Amount of Each Disbursement this Period

331.30
--------

Full Name (Last, First, Middle Initial)

**B. Staples**

Mailing Address Route 33

City	State	Zip Code
Hamilton	NJ	08619

Purpose of Disbursement  
Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2015

Transaction ID : B192B337FBEF84C468E2

Amount of Each Disbursement this Period

125.38
--------

Full Name (Last, First, Middle Initial)

**C. Accountemps**Mailing Address 700 Alexander Park  
Ste 200

City	State	Zip Code
Princeton	NJ	08540-6351

Purpose of Disbursement  
Compliance Consulting

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2015

Transaction ID : BAE288182F6D74C74886

Amount of Each Disbursement this Period

1377.00
---------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1833.68
---------

--

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New Jersey Republican State Committee

3000.00

299.83

4299.83

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 24

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

**A. Capitol View Urban Renewal Assoc LLC**

Mailing Address 50 Millstone Road

City East Windsor    State NJ    Zip Code 08520

Purpose of Disbursement  
Rent-Utilities-Parking

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 06 / 2015**Transaction ID : B99A6018D9FE24C82B98**

Amount of Each Disbursement this Period

6067.22

Full Name (Last, First, Middle Initial)

**B. Verve Mail**Mailing Address 5348 Vegas Dr  
Ste 289

City Las Vegas    State NV    Zip Code 89108-2347

Purpose of Disbursement  
Digital Consulting

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 06 / 2015**Transaction ID : B7033C1C67E8E42A6A37**

Amount of Each Disbursement this Period

1013.77

Full Name (Last, First, Middle Initial)

**C. Watchung Spring Water Co Inc**

Mailing Address 1900 Swarthmore Ave

City Lakewood    State NJ    Zip Code 08701-4530

Purpose of Disbursement  
Water Service

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2015**Transaction ID : B66CC641922DE4A81829**

Amount of Each Disbursement this Period

79.96

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7160.95

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

New Jersey Republican State Committee

**A. New River Research Institute LLC**

Date of Disbursement

Transaction ID : B1DE8F7135C834891B7F

00:

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

2000.00

## B. Canton Group

Date of Disbursement

Transaction ID : BB9821FFDBB3846F6AFD

00

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	90.00%

### C. Huckaby Davis Lisker

Date of Disbursement

Three digital displays are shown side-by-side, separated by slashes. The first display shows '12' with two small squares above the '1' and two above the '2'. The second display shows '21' with two small squares above the '2' and two above the '1'. The third display shows '2015' with two small squares above the '2', two above the '0', two above the first '1', and two above the '5'.

Transaction ID : BEA947DB206E14B319DA

00-

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

3090.00

3090.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 24

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**New Jersey Republican State Committee**

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address PO Box 408

City Newark    State NJ    Zip Code 07101

Purpose of Disbursement  
Phone Service

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 21 / 2015
**Transaction ID : BEB701DB0A7574D28AC1**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Fulcrum Campaign Strategies**

Mailing Address

137 Fifth Avenue 3rd Floor

City New York    State NY    Zip Code 10010

Purpose of Disbursement  
Debt Repayment - GOTV Mailer

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2015
**Transaction ID : BC209691DFFEE49E68CB**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 1270

City Newark    State NJ    Zip Code 07101-1270

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE MEMOS

001

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2015
**Transaction ID : B1B93FD95B4D0460A851**

Amount of Each Disbursement this Period

1150.71

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4150.71

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 24

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

New Jersey Republican State Committee

Full Name (Last, First, Middle Initial)

**A. Samuel Raia**

Mailing Address 2 Quail Ridge Road

City Saddle River      State NJ      Zip Code 07458

Purpose of Disbursement  
Travel Expense Reimbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12      21      2015

Transaction ID : BE1B59AD4AEE646AD873

Amount of Each Disbursement this Period

1054.20

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address

PO Box 6057

City Dearborn      State MI      Zip Code 48121

Purpose of Disbursement  
Travel Expense

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12      21      2015

Transaction ID : BC1841AD820424E99AB0

Amount of Each Disbursement this Period

1054.20

**[MEMO ITEM]**  
Travel Expense

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City      State      Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1054.20

22628.80

	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

New Jersey Republican State Committee

**A. NJ Dealers Auto Mall Inc**

Date of Disbursement

**Transaction ID : BA234C44DEF214D0C979**

010

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

1500.00

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 24 OF 24

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

New Jersey Republican State Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fulcrum Campaign Strategies

Nature of Debt (Purpose):  
Slated Mail Production

Mailing Address

137 Fifth Avenue 3rd Floor

City State

Zip Code

New York

NY

10010

Outstanding Balance Beginning This Period

12517.39

Transaction ID : DB3A1808C491946DD92F

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12517.39

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fulcrum Campaign Strategies

Nature of Debt (Purpose):  
GOTV Mailer

Mailing Address

137 Fifth Avenue 3rd Floor

City State

Zip Code

New York

NY

10010

Outstanding Balance Beginning This Period

33280.27

Transaction ID : D961DB2C3E3D4417CB85

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33280.27

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fulcrum Campaign Strategies

Nature of Debt (Purpose):  
GOTV Mailer

Mailing Address

137 Fifth Avenue 3rd Floor

City State

Zip Code

New York

NY

10010

Outstanding Balance Beginning This Period

5490.42

Transaction ID : DE9D2BEA0C7D14BEF815

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

2990.42

1) SUBTOTALS This Period This Page (optional)..... ►

48788.08

2) TOTALS This Period (last page this line number only)..... ►

48788.08

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

48788.08